

Cultural Anchors and Junior Anchors Grant Application 2010/11

Non-Profit Organizati (Name as it appears in ar	
Federal ID#	
Year and State of Inc	corporation
Mailing address	
City	State Zip
Executive Director	
Phone E	Email
Name of Grant Writer	r
Grant contact person	Title
Phone	Fax Email
Web address	
Select one of the follo	owing:
☐ Performing Arts In	estitution
☐ Museum/Visual A	rts Institution
Maximum Request Lo	evel (select one):
□\$25,000	Junior Anchors with annual organizational budgets below \$750,000
□\$30,000	Anchors with annual organizational budgets between \$750,000 and 3.5M
□\$35,000	Anchors with annual organizational budgets at or above \$3.5 M
Is your organization of	currently involved in litigation with the City of Miami Beach Yes No

Grant Proposal

Please type in 12 point type and only in designated space.

Organization & Mission (use designated space on this page): Please describe the organization in terms of its mission.
I. Cultural Excellence: Describe the organization's plan for developing and sustaining a high level of cultural excellence.

- List seasonal programs or productions presented during the 2009/10 season and scheduled for 2010/11. Be sure to include participating artists, locations/venues and dates.
- Provide a brief history of your organization's services and programs. Substantiate the ways in which your programs have been culturally excellent. Note how your programs support your mission.
- How do your programs sustain and advance your artistic discipline? (e.g., reviews by acknowledged critics / professional evaluations by recognized experts within your field / strategic artistic efforts and collaborations specifically to expand the cultural field of artistic specialization, etc.).

USE THE DESIGNATED SPACE ON THE FOLLOWING TWO PAGES

Cultural Excellence / Page 1.					

Cultural Excellence / Page 2.					

II. Impact and Audience Development

- Provide comparative evidence of attendance trends.
- Provide overall audience cultivation and expansion techniques.

USE THE DESIGNATED SPACE ON THIS PAGE ONLY

III. Organizational Stability and Management Capacity

- How does your organization demonstrate its ability to secure and maximize resources that support the artistic development, growth and implementation of programs?
- How does your organization document its multi-year fiscal responsibility and accuracy?

USE THE DESIGNATED SPACE ON THIS PAGE ONLY

IV. Organizational Outreach

Describe the organization's public outreach, minority service and audience development programs. Please specify the particular program offerings by date, venue, constituencies addressed, numbers of participants, demographic profiles, etc.

USE THE DESIGNATED SPACE ON THIS PAGE ONLY

FINANCIAL INFORMATION SUMMARY

		Prior Fiscal Year (Last Audited / FY	<u>Current Fiscal Year</u> (FY2009/10)	Proposed Fiscal Year (FY2010/11)
City of Miami Beach Gr Requested/Awarded:	ants	1	1	/
	-	(requested/awarded)	(requested/awarded)	(requested/awarded)
Total Operating Reven	ues:			
Total Operating Expens	ses:			
Total Organizational Bu	udget:			
List funding for pro	posed fisca	l year both secure	and pending from all ot	her sources.
				Amount Secured
				or Pending
Month/Year	<u>Fundin</u>	g Source	Amount Requested	(please specify)
Total Requested:	\$			
Total Pending:	\$			
Total Received to Da	to: ¢			

In-Kind Goods and Services Listing

In-kind contributions of goods and services (excluding valuations of volunteer hours), that have a fair market value representing real cash value offsets to actual operating expenses, and <u>are recognized in your annual audit</u>, may be included in the "Total Operating Revenue Budget and Operations." However, total in-kind contributions may not exceed 25% of the total operating budget. In-kind contributions, and the source(s) through which they are provided, must be specifically itemized and accounted for, by year, on this page. Additional pages may be added, as necessary. In-kind must match totals listed on the following two budget pages. Museums may submit the value of donated art works or historical objects under the specific fiscal year for which they are being accounted. An itemized list of such donations must include a description or title, name of artist (if applicable), date of donation and value.

TOTAL OPERATING REVENUE BUDGET AND PROJECTIONS COMPLETED (PAST 2 YEARS), CURRENT AND PROJECTED FISCAL YEARS

List all operating revenues. Round all figures to the nearest dollar. Provide information which represents the actual results of the two most recently completed fiscal years, as reflected in the respective audited statements and the expected total operating revenues in the current fiscal year and projections for the next fiscal year.

	COMPLETED FY 2007/08	COMPLETED FY 2008/09	Current FY 2009/10	PROJECTED FY 2010/11
Admissions				
MEMBERSHIP				
CONTRACTED SERVICE REVENUE				
Outside Programs / Performances				
TUITIONS / ENROLLMENT FEES				
SPECIAL EXHIBITION FEES				
OTHER				
PUBLICATIONS / ROYALTIES				
RENTAL				
STORE / CONCESSIONS REVENUES				
CORPORATE CONTRIBUTIONS				
FOUNDATION GRANTS				
PRIVATE / INDIVIDUAL CONTRIBUTIONS				
OTHER PRIVATE SUPPORT				
AUXILIARY ACTIVITIES				
SPECIAL EVENTS PROCEEDS				
GOVERNMENT GRANTS (IDENTIFY SOURCES) FEDERAL				
STATE				
LOCAL (OTHER THAN THIS REQUEST)				
INVESTMENT INCOME (ENDOWMENT)				
INVESTMENT INCOME (ENDOWMENT) INTEREST AND DIVIDENDS				
OTHER REVENUE (ITEMIZE BELOW)				
OTHER REVENUE (ITEMIZE BELOW)				
CITY OF MIAMI BEACH ANCHORS GRANT				
TOTAL CASH OPERATING REVENUES				
TOTAL VALUE OF IN-KIND CONTRIBUTIONS				
TOTAL OPERATING REVENUES				
TOTAL OF LITATING FIEVEROES				

TOTAL OPERATING EXPENSE BUDGET AND PROJECTIONS COMPLETED (PAST 2 YEARS), CURRENT & PROJECTED YEARS

List all operating expenses. Round all figures to the nearest dollar. Provide information which represents the actual results of the two most recently completed fiscal years, as reflected in the respective audited statements and expected total operating expenses in the current fiscal year and projections for the next fiscal year.

	COMPLETED FY 2007/08	COMPLETED FY 2008/09	Current FY 2009/10	PROJECTED FY 2010/11
PERSONNEL				
ADMINISTRATIVE				
ARTISTIC				
TECHNICAL/PRODUCTION				
OUTSIDE PROFESSIONAL SERVICES				
SPACE RENTAL				
TRAVEL				
Insurance				
MARKETING				
ADVERTISING / PUBLICITY				
DESIGN / PRINTING / PUBLICATION				
POSTAGE / DISTRIBUTION				
WEB DESIGN / SUPPORT / MAINTENANCE				
OTHER				
TELEPHONE / COMMUNICATION				
STORE / CONCESSIONS MERCHANDISE				
EQUIPMENT				
SUPPLIES / MATERIALS				
UTILITIES				
FUNDRAISING/DEVELOPMENT (NON- PERSONNEL) e.g., GALAS; GUILD EVENTS; FESTIVALS; etc.				
OTHER OPERATING EXPENSES (ITEMIZE)				
TOTAL CASH OPERATING EXPENSES				
TOTAL VALUE OF IN-KIND SERVICES				
TOTAL OPERATING EXPENSES				
BALANCE, BEGINNING OF YEAR				
Balance, End of Year				
CHANGE IN BALANCE				

ON A SEPARATE, ATTACHED SHEET, EXPLAIN ANY DEFICITS OR EXCESSES OF OPERATING REVENUES OVER EXPENSES, AND BOARD-ADOPTED PLANS TO MANAGE THE DEFICITS OR EXCESSES

REQUIRED ATTACHMENTS – please attach as indicated to the original application and all application copies.

- ✓ Current Board membership (with contact information) and staff lists with brief bios included
- ✓ Additional supplemental organizational and program materials are limited to 10 items or pages front and back.

Please attach a copy of the organization's most recent fiscal year IRS Form 990 to the original application only.

Please attach a copy of your 501(c)(3) letter of determination, dated within the past two years to the original application only. Updated letters can be obtained from the Internal Revenue Service via fax and mail at 1-877-829-5500.

Please note: All organizations must be registered as Lobbyists with the City of Miami Beach City Clerk's office prior to presenting to the Grant Panelists. Non-profit organizations are exempt from paying the fee but must still register. For more information, please call 305-673-7411 or visit http://www.miamibeachfl.gov/newcity/depts/clerk/clerk.asp.

CERTIFICATION / SIGNATURE

I certify that all information contained in this application and attachments are true and accurate, and that I am authorized by the applicant hereto to execute this application.

Name		Title	
	(Please Print)		
Signature		Date	

All funded activities must provide equal access and equal opportunity in employment and services and may not discriminate on the basis of disability, race or ethnicity, color, creed, national origin, religion, age, gender, or sexual preference, in accordance with Title VI and Title VII of the Civil Rights Act of 1964, the Age Discrimination Act of 1975 and Title IX of the Education Amendments of 1972 as amended (42 U.S.C. 2000d et seq.), the Americans with Disabilities Act (ADA) of 1990, and Section 504 of the Rehabilitation Act of 1973.

Grantees must include the following credit line in all promotional and marketing materials related to this grant including news releases, public announcements, press releases, print and broadcast media: "With the support of the City of Miami Beach Department of Tourism and Cultural Development, Office of Cultural Affairs, and the Miami Beach Mayor and City Commissioners." Grantees are also required to use the City of Miami Beach in marketing and publicity materials. Logo files are available at www.mbculture.org under *Grants*.

The City of Miami Beach provides equal access and equal opportunity in employment and services and does not discriminate on the basis of race or ethnicity, color, creed, national origin or religion, age, gender, sexual preference, in accordance with Title VI and Title VII of the Civil Rights Act of 1964, the Age Discrimination Act of 1975 and Title IX of the Education Amendments of 1972 as amended (42 U.S.C. 2000d et seq.). The City of Miami Beach Department of Tourism and Cultural Development, Office of Cultural Affairs, supports and advocates compliance with the requirements of the Americans with Disabilities Act (ADA) of 1990, and Section 504 of the Rehabilitation Act of 1973 which prohibit discrimination on the basis of disability.